

# Camp Canine Camper Information Sheet

Date \_\_\_\_\_

## Human's Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to receive email updates on Camp Canine activities, coupons, etc? \_\_\_\_\_

Alternate Emergency Contact (if you are on vacation or cannot be reached):

Alternate Contact Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Vet's Name: \_\_\_\_\_ City: \_\_\_\_\_

Vet's Phone Number: \_\_\_\_\_

## Dog's Profile:

City Dogs is Licensed in: \_\_\_\_\_ Is your dog FIXED? \_\_\_\_\_

Name: \_\_\_\_\_ Color \_\_\_\_\_ Sex: \_\_\_\_\_

Breed: \_\_\_\_\_ Dogs Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Is your dog house trained: \_\_\_\_\_ Is your dog crate trained \_\_\_\_\_ Allergies \_\_\_\_\_

Are treats allowed \_\_\_\_\_ Any past injuries we should know about \_\_\_\_\_

Will we be giving medications \_\_\_\_\_ How Much/When \_\_\_\_\_

Has your dog ever shown aggression towards other dogs? \_\_\_\_\_ Humans? \_\_\_\_\_

Has your dog ever bitten another dog? \_\_\_\_\_ Human? \_\_\_\_\_

Is your dog frightened by anything \_\_\_\_\_ Jumps Fences? \_\_\_\_\_

How often does you dog play with other dogs \_\_\_\_\_ Breed \_\_\_\_\_

## Camp Canine Owners Agreement

I understand and agree that admitting my dog(s) to Camp Canine, their staff has relied on my representations that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or other dog.

I further understand and agree that Camp Canine staff and volunteers will not be liable for any problems that develop regarding my dog(s). I hereby release Camp Canine, its employees, agents, volunteers from any liability of any kind whatsoever arising from my dog(s) attendance, care and participation at Camp Canine or in connection with any casualty or illness occurring to my dog(s) or any person, including me.

I understand that during open/normal dog play there is a chance that my dog may get scratches, bites , punctures or contract an illness from another dog. I further understand and agree that any problems that develop with my dog(s) will be treated as deemed best by staff and volunteers of Camp Canine in their sole discretion, and I assume full financial responsibility for any and all expenses involved including veterinary services expenses.

I am solely responsible for any harmed caused by my dog(s) while my dog(s) is/are attending Camp Canine. In addition, I further agree that I am solely responsible for any and all acts or behavior of my dog(s) while in the care of Camp Canine. **I also agree if my dog(s) are/is coughing or showing signs of an illness, I will not bring them to Camp Canine for 10 days or more depending on the issues and contagious/shedding time of such illness. If my dogs has stitches or in need of medical care, I will not bring them to Camp Canine.** If my dog becomes ill while in the care of Camp Canine, I agree to have my dog(s) picked up within 24 hours by myself or an emergency contact. If my dog(s) cannot be picked up, I understand there may be additional fees of up to \$20.00 or more per day for quarantine services or veterinary care.

I agree that I or a pre approved agent will pick up my dog by closing or scheduled time or I will be charged additional fees after 6:30 PM or my scheduled time if my dog is not picked up. I understand there is a \$20 deposit is required to make a boarding reservation and if I cancel, the \$20 deposit is non refundable and non transferable as well as an \$10 early pick up fee shall apply if I pick up my dog early from boarding.

I agree that my dog(s) may be video taped, photographed and recorded. Camp Canine shall be the exclusive owner to the results and all proceeds of such videos, photographs and recordings within the rights, throughout the world and unlimited number of times in perpetuity, to copyright, to use and to license to others in any manner. I further agree that my dog(s) may be used in any and all media and in the promotion, advertising, sale, publicizing and exploitation of Camp Canine.

**I certify my dog(s) are/is in good health and have not been ill with any communicable condition in the past 30 days. I further certify that my dog(s) have never harmed or shown aggressive or threatening behavior towards any person or any other dog and that my dog(s) is/are current on the following vaccinations: Distemper, para-influenza, Parvo, Lepto (DHLPP), Canine Influenza H3N2/H2N8, Bordetella/negative fecal test (every 6 months) and Rabies,. I also agree to maintain vaccinations and to keep Camp Canine apprised on any updates, changes, etc.**

**I certify I have read, agree and understand the policies set fourth above and that I have read and understand this agreement. I agree to abide by the rules and regulations and accept all terms, conditions and statements of this agreement.**

**Dog(s) Name(s):** \_\_\_\_\_

**Signature of Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_